

**Homa Bahrami** is a Senior Lecturer at the Haas School of Business, University of California, Berkeley, Management & Organization Group, and an international educator, advisor, board member and author, specializing in enterprise flexibility and dynamic leadership in global, knowledge-based industries. Homa spoke with Berkeley ExecEd about 'Ways Leaders Can Improve Team Performance'.

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**ExecEd:** In your book and in your research, you talk a lot about the diagnostic framework for teams and the anatomy circulation personality. Could you share some of that?

**Homa Bahrami:** When you look at a team, you have to think about it as a human living entity. I'd like to give my students and my executives a simple framework so they can assess the health of their teams on a regular basis. I am not a believer in magic formulas that are going to suddenly improve the health of a team. I'm much more of a believer that you have to be a diagnostician and diagnose the health of your team on a regular basis. Given that assumption, I like to think of teams in terms of having three foundational building blocks, the anatomy, the personality, and the circulation.

The anatomy of the team is basically the foundation of a team. It's about the goals, priorities of a team, roles and responsibilities of team members, how they measure success, performance metrics for assessing the team performance. It's about the stakeholder relationships. Who are the stakeholders that have to be engaged and involved with the team on a regular basis? That is the anatomical foundational building block of a team.

Secondly, we move on to the personality of a team. That is really foundationally about the team culture. It's really about the chemistry between the team members. It's about the profile of team members. It's about the team leader's approach, style, personality. It's about the size of a team and how team members basically coalesce together.

When I think about the team personality, I think about the behavior of the team. How do they deal with conflict for example. How do they make decisions? How do they interact together? Thirdly, we think about the team circulation.

Circulation is about how team members interact and communicate with each other. Do they have simple ground rules? Do they have ways of segmenting their meetings and their interactions? Do they have common tools and templates that they use to keep each other informed? Circulation is particularly important if you are having a distributed team that is not co-located, because you do not have the informal mechanism of seeing each other at the watercooler, interacting in the car park, seeing each other on a more regular basis.

These are the three key building blocks, the anatomy, the personality, and the circulation. Circulation as I said is becoming much more significant today because of the phenomenon of global distributed teams.

**ExecEd:** It's a great analogy or metaphor. How do you consult? How do you advise leaders to use this? What are they doing with this information? How are they diagnosing?

**Homa Bahrami:** I use the diagnostic framework in several different ways. First of all, I have an executive program called 'Bootcamp for Experienced Leaders' which is focused foundationally on teams. I have developed a proprietary survey based on my research which I use with my participants, so we diagnose what they think about their team and what their team members think about the team, and then, we use the survey to assess the gap between their team perception and their own perception. The executive program, it's a three-day program, and we use the diagnostic and the various team tools as a way of really making this concept very hands-on, very actionable. Secondly, I have an executive MBA class where we take the 'CAP framework' as we call it. CAP stands for circulation, anatomy, personality.

We use that in a more extensive way in my executive MBA courses, and we combine that with a whole host of cases and other material that basically augment and support the diagnostic. Then, I use that in my advisory and consulting work with my

companies, because if you can identify the team pain points proactively on a regular basis, if you can identify the difference between how the leader thinks and what the team members think, you can make appropriate interventions on time. If you don't have a diagnostic capability, unfortunately, it's like waiting until the disease is fully developed. Your treatment options are much more limited. The diagnostic is used to really be proactive in identifying the pain points and making appropriate interventions.

**ExecEd:** Do you hear from your participants that they're getting 'Aha' moments? In other words, people struggle all the time with creating the most effective team.

**Homa Bahrami:** The 'Aha' moment really comes from my participants when they see the gap between what their assessment of the team health is and what their team members assessment is. That is the biggest 'Aha'. "I did not realize that this was the big issue. I did not realize that they're not clear about their roles and responsibilities. I thought I had communicated the priorities to them really effectively."

That is the 'Aha' moment. It's just like someone going for their annual check-up and finding out that their blood sugar has really increased and saying, "Wow. I had no idea. I thought I was eating well. I was keeping my blood sugar and my cholesterol in check."

That is the biggest 'Aha', and that gives us a springboard for then thinking about "What are you going to do about it?" Basically, what I hear from my executives is they tend to use this what I call the 'CAP check-up tool' on a very regular basis with their teams. Sometimes, they use it monthly. Sometimes, they use it quarterly. I know one team that uses it on a semi-annual basis when they have a big team offsite and they use the survey as a way of identifying their challenges and then use the offsite to brainstorm solutions. It's used in a variety of different ways, but it's what I call a 'Check-up tool'.

And you can use it in different ways depending on how frequently you want to assess the health of your team.